



NATIONAL BOARD FOR
CERTIFIED COUNSELORS.



CENTER FOR
CREDENTIALING
& EDUCATION.

TENNESSEE

LICENSURE EXAMINATION REGISTRATION

Tennessee Jurisprudence Examination for Professional Counselors (TJEPC)

ABOUT REGISTRATION

- The cost to register is \$100. This examination fee is **nonrefundable and nontransferable**.
- Registration is required. Deadlines are strictly enforced.
- All exam registration materials must be received (not postmarked) by the registration deadline.
- You will receive your admission ticket approximately two weeks prior to the deadline.
- Your admission ticket will include information regarding the date and location of the exam.

Questions about the exam administration: Tel: 336-217-4111; **E-mail:** exam@cce-global.org; **Web site:** www.nbcc.org
Street address: CCE Assessment Dept., 3 Terrace Way, Greensboro, NC 27403.

Check One	Exam	Exam Date	Registration Deadline	Site	ID
<input type="checkbox"/>	TJEPC	1/16/2016	12/3/2015	Nashville, TN	4234
<input type="checkbox"/>	TJEPC	4/16/2016	3/3/2016	Knoxville, TN	4211
<input type="checkbox"/>	TJEPC	4/16/2016	3/3/2016	Nashville, TN	4231
<input type="checkbox"/>	TJEPC	7/16/2016	6/3/2016	Nashville, TN	4233
<input type="checkbox"/>	TJEPC	10/15/2016	9/1/2016	Chattanooga, TN	4202
<input type="checkbox"/>	TJEPC	10/15/2016	9/1/2016	Memphis, TN	4222

PLEASE INCLUDE THE FOLLOWING WITH YOUR MATERIALS:

- Your completed registration form.
- Your \$100 examination fee. Please make check or money order **payable to NBCC**.

SEND REGISTRATION MATERIALS TO:
CCE Assessment Dept.
P.O. Box 7407
Greensboro, NC 27417-0407.

FOR OFFICE USE ONLY

REF.#1: _____

BATCH #1: _____

DATE: _____

AMOUNT: _____

1. First Name/MI: _____ Last Name: _____
Previous Name(s): _____
2. Street Address: _____
City, State: _____ ZIP Code: _____
3. Social Security Number: _____
4. Telephone: (Home) _____ (Business) _____
5. E-mail: _____
6. Gender: ☐ Male ☐ Female
7. Date of Birth (mm/dd/yyyy): _____
8. Are you requesting special examination accommodations? ☐ Yes ☐ No
9. Have you previously taken the NCE with NBCC? ☐ Yes ☐ No
10. Have you previously taken the NCMHCE with NBCC? ☐ Yes ☐ No

I understand that I am taking the TJEPC for the purpose of fulfilling requirements for counseling licensure in Tennessee. A passing score does not guarantee approval of any other licensure requirements. I authorize CCE to provide the Tennessee State Board of Licensed Professional Counselors, Licensed Marital and Family Therapists and Licensed Pastoral Therapists with examination results. Use of the TJEPC scores for licensure in other states may not occur until licensure is granted in Tennessee.

Signature: _____ Date: _____

PAYMENT FORM

- ☐ Enclosed is a check or money order payable to NBCC.

Card Type: ☐ VISA ☐ MasterCard ☐ American Express Amount: \$ _____

Name on Card: _____

Card Number: _____

Expiration Date: _____ / _____

Verification Code Numbers (from back of card): _____

- ☐ Please charge the credit card listed on the right.

Cardholder Signature: _____ Date: _____

Daytime Telephone: _____ Evening Telephone: _____